CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees APR 2 6 2022

1. DATE OF REPORT	2.a. NAME OF CANDIDATI	E OR COMMITTEE		WILSON COUNTY 8
4/26/22	Joseph PAD	ILLA		ECTION COMMISSION
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DA	
4.a. CAMPAIGN ADDRESS AND PHONE			2033	<u> </u>
Street or Rural Route	City	State	Zip Code	Phone
1106 Camden Circle	Mount Juliet	IN	37122	615-210-5764
4.b. CANDIDATE'S HOME ADDRESS (if differe Street or Rural Route	nt than 4.a.) City	State	Zip Code	Phone
			<u>'</u>	
5. OFFICE SOUGHT (include district number,	if applicable) 6. NA	TOY HILL	TREASURER (may	be candidate)
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH PRE-	PRE- Y GENERAL	MID-YEAR SUPPLEMENT	YEAR-END AL SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD		DING DATE OF REPO	RTINGPERIOD	AL SOFFILINENTAL
4-1-22		4-23-	22	
9. (Check one)				
 This campaign is exempt from detail tures total \$1,000 or less for this rep 	ed disclosure because contribuorting period. (Complete items	itions (including in-ki i 12d., 12e. and 12f.)	nd) received total \$	1,000 or less AND expendi-
 This campaign is required to file a de and/or expenditures total more than 			ncluding in-kind) rec	eived total more than \$1,000
 I/we do solemnly swear or affirm that the i accurate accounting of campaign contributi Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other no 	ons and expenditures required swear or affirm that no campa	to be reported by thi ign contributions hav	e candidate commit ve been expended f	ttee by the Campaign
	11.10	0.		1/-1/20
signature of candidate	4126 8C	dignatute	of political treasurer	- 4/20/22
Signature of Cardidate	date	agnature c	political treasure.	uale
11. WITNESS SIGNATURE				/ .
signature of witness	//26/pr	gosch	Parille.	4 26/12 date
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT			.\$	_
b. TOTALRECEIPTS THIS PERIOD			\$ 932.07	_
c. TOTAL DISBURSEMENTS THIS PERIOD			.\$	
d. BALANCE ON HAND (12.a. plus 12.b. r	ninus 12.c.)			\$
e. TOTAL LOANS OUTSTANDING				\$
f. TOTAL OBLIGATIONS OUTSTANDING				\$

SUMMARY PAGE - CANDIDATE



13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COMESCING OWNESS OF FROM:					
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)						
a. Unitemized Contributions (\$100 or less from each source this period)	\$					
b. Itemized Contributions (over \$100 from each source this period)	\$ 937.03					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)\$						
6. LOANS RECEIVED THIS REPORTING PERIOD\$						
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$					
8. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)						
DISBURSEMENTS						
19. EXPENDITURES (other than loan payments)						
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	g., printing, postage, gasoline)					
\$						
\$						
\$						
\$	_					
\$						
\$						
\$						
	ø					
Total of Expenditures (\$100 or less each payee)	• Q77.07					
b. Itemized Expenditures (Over \$100 each payee this period)	# 837.07					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)						
20. LOAN REPAYMENTS MADE THIS PERIOD						
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)\$						
22.IN-KIND CONTRIBUTIONS						
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$						
b. Itemized in-kind contributions (over \$100 from each source this period)\$						
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$						
23. OBLIGATIONS						
a. Unitemized Obligations Outstanding (\$100 or less each)\$						
b. Itemized Obligations Outstanding (Over \$100 each)\$						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$						



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE &

1. NAME OF CANDIDATE OR COMMITTEE	11	7111		FROM: 4	TO: 4 23 22
	105ep	Padilla		110101.41112	Amount
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Ø
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEMIZ	ED CONTRIBUTION (C		100 from any contributor	
First Name Ken	Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Primary Election General Election		\$ 500.00	
Address 801 Hom Series	Zond		Runoff (Local Election	s Only)	
City Legamo	State	Zip Code 37 0 37	Date of Contribution		Aggregate This Election
Occupation Agent		7/3/9		\$ 1500.00	
Collvell Backer					
First Name Joseph	Middle Name	Arthur	Contribution Received For:		Amount of Contribution
Last Name/Organization Name			Primary Election General Election		\$ 332.03
Address 1106 Carda Circle			Runoff (Local Election	ns Only)	
City Marat Juliet	State	Zip Code 371122	Date of Contribution		Aggregate This Election
Occupation Retired		4/23/22		¥ 39 z1.90	
Employer					
First Name	Middle Name		Contribution Received For:		Amount of Contribution
Last Name/Organization Name		Primary Election	General Election		
Address		Runoff (Local Election	ns Only)		
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation					Aggregate This Election
Occupation					Aggregate This Election
Occupation Employer					Aggregate This Election
	Middle Name		Contribution Received For:		Amount of Contribution
Employer	Middle Name			General Election	
Employer First Name	Middle Name				Amount of Contribution
Employer First Name Last Name/Organization Name	Middle Name	Zip Code	☐ Primary Election ☐		
Employer First Name Last Name/Organization Name Address			☐ Primary Election ☐		Amount of Contribution
Employer First Name Last Name/Organization Name Address City			☐ Primary Election ☐		Amount of Contribution

RECEIVED

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

				WILSON COUNTY
NAME OF CANDIDATE OR COMMITTEE	-	L Padilla		2. REPORCIONERION WINE PERIOD FROM: 4 22 TO: 4 23 22
	Amount/			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU				
4. COMPLETE THE APPROPRIATE ITEMS FOR E	ACH ITEM	IZED EXPENDITURE (expenditures totaling more than \$100 to	o any payee during the period)
First Name Middle Name		Purpose of Expenditure	Arnount of Expenditure	
Last Name/Business Name			Signs	\$ 627.38
	dress 35 BO N.M Solet Road			
City Mount Joint	State TIV	Zip Code 271th		
First Name	Middle Na	me	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			Ract Carols	\$ 204.65
Address 40 5. M. Juliet 12	and s	44 635		
City Mant Sulcet	State	Zip Code		
First Name	Middle Nar	ne	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address				
City	State	Zip Code	1	
				The state of the s
First Name	Middle Nam	ne	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address		1		
City	State	Zip Code	-	
	A Callo Non	194	Purpose of Expenditure	Amount of Expenditure
First Name Middle Name		Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name				
Address				
City	State	Zip Code		
First Name	Middle Name		Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name				
Address				
City	State	Zip Code		
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must				832.03